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PTO/SB/01 (12-97)

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Attorney Docket Number	1322/58				
First Named Inventor	Tinsley, Robert John				
COMPLETE IF KNOWN					
Application Number					
Filing Date					
Group Art Unit					
Examiner Name					
	First Named Inventor COMPLETE II Application Number Filing Date Group Art Unit				

As a below named inventor, I hereby declare that:										
My residence, post office address, and citizenship are as stated below next to my name.										
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:										
DISTRIBUTED SS7 MESSAGE ROUTING GATEWAY										
the specification of which is attached hereto	(riu	le of the Invention)								
was filed on (MM/DD/YYYY) as United States Application Number or PCT International										
Application Number	Application Number and was amended on (MM/DD/YYYY) (if applicable).									
I hereby state that I have re amended by any amendme	eviewed and understand the dent specifically referred to abo	contents of the above identif	fied specification	, including the claims, as						
, ,	disclose information which is		defined in 37 CFI	R 1.56.						
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 356(b) of any foreign application(s) for patent or inventor's certificate, or 356(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.										
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO						
	ation numbers are listed on a									
	under 35 U.S.C. 119(e) of any	- Y	application(s) list	ed below.						
Application Number	(s) Filing Date	e (MM/DD/YYYY)	numbe supple	onal provisional application ers are listed on a mental priority data sheet B/02B attached hereto.						
			1 10/0	brozb allached hereib.						

[Page 1 of 2]
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X Additional inventors are being named on the

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DECLARATION – Utility or Design Patent Application

Ihereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application. U.S. Parent Application or PCT Parent **Parent Patent Number Parent Filing Date** Number (MM/DD/YYYY) (if applicable) Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02C attached hereto. As a named inventor, I hereby appoint the following registered practioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: X Customer Number 25297 OR Registered practitioner(s) name/registration number listed below Registration Registration Name Name) (Number Number TRADEMARK OFFICE PATENT Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto. Direct all correspondence to: Customer Number OR X Correspondence address below or Bar Code Label Gregory A. Hunt, JENKINS & WILSON, P.A. Name Suite 1400 University Tower Address 3100 Tower Boulevard Address 27707 Durham City State 7 IP Telephone |001-919-493-8000|USA 001-919-419-0383 Country I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. A petition has been filed for this unsigned inventor Name of Sole or First Inventor: Given Name (first and middle [if any]) Family Name or Surname Tinsley Robert John Inventor's Date Signature INC US Chapel Hill US Residence: City Country 126 Hillspring Lane Post Office Address Post Office Address US Chapel Hill state 27516 City ZIP Country

supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 2

	<u> </u>										
Name of Additional Joint Inventor, if any:											
Given Nar	Given Name (first and middle [if any]) Family Name or Su						Surname	итате			
Peter Joseph Marsico											
inventor's Signature									Date		
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Given Nar	me (first and middle [if any	<u>'</u>])					Family Nan	ne or S	Surname		·
Lee Barfield Smith											
Inventor's Signature	Date										
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Post Office Address						_					
City	Apex	s	tate	NC		ZIP	27405	Coun	try U	S	
Name of Addition	nal Joint Inventor, if ar	ıy:				A petitio	n has been filed	for thi	is unsig	ned inv	ventor
Given Nar	me (first and middle [if any))					Family Nan	ne or S	Sumame		
Virgil Elmer					Long	<u> </u>					
Inventor's Signature	Date										
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Post Office Address											
Post Office Address							6				
City	Raleigh	Sta	te	NC		ZiP	us	C.	ountry	US	

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 2 of 2

				•						
Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor										
Given Name (first and middle [if any]) Family Name or Surname										
Gregory Allen Hunt										
Inventor's Signature	Date									
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City	Morrisville	State	NC		ZIP 2	7560	Countr	y US		
Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor										
Given Na	me (first and middle [if any])				Family Na	ne or	Surname		
Inventor's Signature		·				, . 		Đa	te	
Residence: City		State			Country			Citize	nship	
Post Office Address										
Post Office Address										
City		State			ZIP		Cour	ntry		
Name of Additional Joint Inventor, if any:										
Given Name (first and middle [if any]) Family Name or Sumame										
Inventor's Signature				•					Date	
Residence: City		State			Country			Citize	nship	
Post Office Address										
Post Office Address										
City		State			ZIP		0	Country		

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